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| TRANSMITTAL FORM | | | Application Number | | 10,665,34 | | 11000 | , G,D,D, | 140 27 411 | | OHIO, I | MIIIDEI. |
| | | | Filing Date | | September 18, 2003 | | | | | | | |
| | | | First Named Invento | r j | Diehl et al. | | | | | | | |
| | | | Art Unit 1616 | | | | | | - | | | |
| (to be used for all correspondence after initial filing) | | | Examiner Name | Examiner Name Sabiha Naim Qazi | | | | | | | _ | |
| \ | | | Attorney Docket Nur | nber | A01341-US-3 | | | | | | | |
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| Firm Name | Rohm and Haas Company | | | | · · · · · · · · · · · · · · · · · · · | | | | | | | |
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| sumcient postage | at this correspondence is being as first class mail in an enve | ng facsim lope addr | nile transmitted to the Uressed to: Commission | JSPTO o | r deposit | ted with O. Box | the Uni 1450, A | ited S Vexar | tates Po | stal Se \ 22313 | rvice v -1450 | vith on |
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| Typed or printed name Janide Soulas | | | <u> </u> | | | | 20.6 | | , | 6- | 10 | |

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentially is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995 no persons are required to r spond to a collection of information unless it displays a valid OMB control numb Effective on 12/08/2004. Complete if Known Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). 10/665,343 Application Number TRANSMI Filing Date September 18, 2003 For FY 2007 First Named Inventor Diehl et al. Examiner Name Sabiha Naim Qazi Applicant claims small entity status. See 37 CFR 1.27 Art Unit 1616 TOTAL AMOUNT OF PAYMENT 540.00 A01341-US-3 Attorney Docket No. METHOD OF PAYMENT (check all that apply) Check Credit Card lMoney Order Other (please identify): None ✓ Deposit Account Deposit Account Number: 18-1850 Deposit Account Name: Rohm and Haas Company For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) ✓ Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee Charge any additional fee(s) or underpayments of fee(s) Charge any authorized 1.17 under 37 CFR 1.16 and 1.17 Credit any overpayments WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. **FEE CALCULATION** 1. BASIC FILING, SEARCH, AND EXAMINATION FEES **FILING FEES EXAMINATION FEES** SEARCH FEES Small Entity Small Entity Small Entity **Application Type** Fee (\$) Fee (\$) Fee (\$) Fee (\$) Fees Paid (\$) Fee (\$) Fee (\$) Utility 300 150 500 250 200 100 Design 200 100 100 50 130 65 Plant 200 100 300 . 160 150 ጸስ Reissue 300 150 500 600 250 300 **Provisional** 200 100 O 0 2. EXCESS CLAIM FEES Small Entity Fee Description Fee (\$) Fee (\$) Each claim over 20 (including Reissues) 50 25 100 Each independent claim over 3 (including Reissues) 200 Multiple dependent claims 360 180 Total Claims **Extra Claims** Fee Paid (\$) Fee (\$) Multiple Dependent Claims - 20 or HP = Fee (\$) Fee Paid (\$) HP = highest number of total claims paid for, if greater than 20. Indep. Claims Extra Claims Fee Paid (\$) Fee (\$) - 3 or HP = HP = highest number of independent claims paid for, if greater than 3. **APPLICATION SIZE FEE** If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fet due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets Extra Sheets Number of each additional 50 or fraction thereof **Total Sheets** Fee Paid (\$) 150 =(round up to a whole number) x 4. OTHER FEE(S) Fees Paid (\$) Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): Appeal Brief 540.00 SUBMITTED BY Registration No. 40.968 Signature Telephone 215-592-3000 (Attorney/Agent) Name (Print/Type) Kenneth Crimaldi 1/26/10

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentially is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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| GROUP ART | UNIT: 1612 |
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| APPEAL NO. | |

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE BEFORE THE BOARD OF APPEALS AND INTERFERENCES

APPEAL BRIEF

In re the Application of Megan Anne Diehl et al.

Filed: September 18, 2003

Serial No. 10/665,343

For: SYNERGISTIC MICROBICIDAL COMBINATIONS

Kenneth Crimaldi Attorney for Appellants

Sabiha Naim Qazi *Examiner*

Enclosed: Transmittal Form